| | | | | | | | | Application or Docket Number | | | | |
|--|--|--|------------------|-------------------------------|--------------------------|------------------|----------------|------------------------------|------------------------|---------|------------|------------------------|
| PATENT APPLICATION FEE DETERMINATION RECO | | | | | | | | 1 | | | / | |
| Effective October 1, 2000 | | | | | | | | | 9823 | 52 | 18371 | -125 |
| CLAIMS AS FILED - PART I | | | | | | | | SMALL ENTITY | | | OTHER | THAN |
| (Column 1) (Column 2) | | | | | | | | TYPE | | | SMALL | |
| TOTAL CLAIMS | | | 48 | | | | R | ATE | FEE | | RATE | FEE |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | BAS | BASIC FEE 355.0 | | OR | BASIC FEE | 710.00 |
| TOTAL CHARGEABLE CLAIMS | | | 48 minus 20= | | , 58 | | X\$ 9≃ | | | OR | X\$18= | 504 |
| INDEPENDENT CLAIMS | | | பு minus 3 = | | | | X40= | | | OR | X80= | SO |
| MU | LTIPLE DEPEN | DENT CLAIM P | RESENT | | | | +135= | | | OR | +270= | |
| * If the difference in column 1 is less than zero | | | | | o, enter "0" in column 2 | | | TOTAL | | OR | TOTAL | 1294 |
| CLAIMS AS AMENDED - PART II | | | | | | | | | <u> </u> | | OTHER | |
| | (Column 1) (Column 2) (Column 3 | | | | | | | SMALL ENTITY | | | SMALL | ENTITY |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER OUSLY | PRESENT EXTRA | RATE | | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | X\$ 9= | | | OR | X\$18= | |
| | Independent | * | Minus | *** | | = | X40= | | | OR | X80= | |
| L | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | +1 | 35= | | OR | +270= | |
| | | | | | | | | TOTAL | <u> </u> | | TOTAL | |
| | (Only 1) | | | | | | ADDIT. FEE OR | | | | ADDIT. FEE | |
| Г | | (Column 1) CLAIMS | | (Colui | | (Column 3) | l — | | 4001 | | | 4001 |
| AMENDMENT B | | REMAINING AFTER AMENDMENT | | NUM PREVIO PAID | OUSLY | PRESENT EXTRA | R/ | ATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | X | 9= | | OR | X\$18= | |
| | Independent | * | Minus | *** | F OL AINA | = | X | 10= | | OR | X80= | |
| <u> </u> | FIRST PRESENTATION OF MU | | CHIPLE DEPENDENT | | CLAIM | | +1 | 35= | | OR | +270= | |
| | <u></u> | | | | | | | | | OB | TOTAL | |
| | | AUDI | r. FEE | <u> </u> | | ADDIT. FEE | | | | | | |
| | F 1 | (Column 1) CLAIMS | | (Colui | EST | (Column 3) | | | ADDI- | | | ADDI- |
| AMENDMENT C | | REMAINING AFTER AMENDMENT | | NUM PREVIO PAID | OUSLY | PRESENT EXTRA | R/ | TE | TIONAL FEE | | RATE | TIONAL FEE |
| | Total | * | Minus | ** | | = | XS | 9= | | OR | X\$18= | |
| | Independent | * | Minus | *** | | = | X4 | l0= | | OB | X80= | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | ^ | - | | OR | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | | | OR | +270= | |
| ** If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE | | | | | | | | | | | | |
| | | mber Previously Pai iber Previously Pai | | | | | er found in | the ap | propriate bo | k in co | lumn 1. | |